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PETITION FOR EXTENSION OF TIME UNDER 3	Docket Number 980034.422C1								
FY 2005 (Fees pursuant to the Consolidated Appropriations A									
Application Number 10/729,822	<u> </u>		Filed I	December 5, 2003					
For COMPOSITIONS AND METHODS FOR ELIMINATING UNDESIRED SUBPOPULATIONS OF T CELLS IN PATIENTS WITH IMMUNOLOGICAL DEFECTS RELATED TO AUTOIMMUNITY AND ORGAN OR HEMATOPOIETIC STEM CELL TRANSPLANTATION									
Art Unit 1644			Examir Michail	ner A. Belyavskyi					
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows (ch fee below):	eck time pe	riod desired	and ente	r the appropriate					
,	<u>Fee</u>	Small E	ntity Fee						
One month (37 CFR 1.17(a)(1))	\$120	\$	60	\$					
Two months (37 CFR 1.17(a)(2))	\$450	\$2	225	\$					
Three months (37 CFR 1.17(a)(3))	\$1020	\$5	510	\$					
	\$1590	\$7	795	\$ <u>1,590</u>					
Five months (37 CFR 1.17(a)(5))	\$2160	\$1	080	\$					
Applicant claims small entity status. See 37 CFI	R 1.27.								
A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
The Director has already been authorized to charge fees in this									
application to a Deposit Account.									
The Director is hereby authorized to charge any		-							
or credit any overpayment, to Deposit Account Number 19-1090. I have enclosed a									
duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be									
included on this form. Provide credit card information and authorization on PTO-2038.									
I am the ☐ applicant/inventor.									
assignee of record of the entire interest. See 37 CFR 3.71									
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).									
attorney or agent of record. Registration No. <u>50,461</u>									
attorney or agent under 37 CFR 1.34.									
Registration number if acting under 37 CFR 1.34									
antie Verrate			August 1	18, 2006					
Signature	Date								
Julie A. Urvater, Ph.D., Patent Agent	206-622-4900								
Typed or printed name Telephone Number									
NOTE: Signatures of all the inventors or assignees of record Submit multiple forms if more than one signature is required.	of the entire	interest or the	ir represei	ntative(s) are required.					

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١, ت	Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).			Application Number 10/729,822							
ا ِ مِن	FEE TRANSMITTAL			Filing Date		December 5, 2003					
UG 1	8 2006 w For FY 2006			First Named	Inventor Ronald Bere		nson				
	<i>[</i> 5]				Examiner Na	ame	Michail A. Be	elyavskyi			
-	Amflicant claims sm	all entity statu		FR 1.27	Art Unit		1644				
(422H	TOTAL AMOUNT OF	PAYMENT	(\$)1,590		Attorney Dod	cket No.	980034.4220	<u> </u>			
.	METHOD OF PAYME	NT (check all ti	nat apply)					AM . 8			
	Check Credit Card Money Order Other (please identify):										
	Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC										
	For the above-ide										
	= -) indicated bel				•	•	ot for the filing fee			
	☐ Charge any a	•		ments	Charge any	underpaym	ents or credit	any overpayments			
	of fee(s) und Warning: Information on this	er 37 CFR 1.1		ard information	should not be inclu	ided on this for	m. Provide credit	card information and			
-	authorization on PTO-2038.	s tonii may become	e public. Credit c	aid iniomation	should not be inclu	ded on this for	III. Plovide credit	cara information and			
ı	FEE CALCULATION	All the fees b	elow are due	upon filin	g or may be su	bject to a	surcharge.)				
	1. BASIC FILING, SE	ARCH, AND E	XAMINATIO	N FEES							
		FILING F	FES	SEARC	CH FEES		NATION				
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			Small Entity		Small Entity		Small Entity				
.	Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)			
	Utility	300	150	500	250	200	100				
	Design	200	100	100	50	130	65				
	Provisional	200	100	0	0	0	0				
	2. EXCESS CLAIM F		100	U	O	U	U				
	Fee Description	EES					F	Small Entity Fee (\$) Fee (\$)			
	Each claim over 20 (inc	ludina Reissue	e)				_	50 25			
	Each independent claim	-						200 100			
	Multiple dependent clair	·	ing reissues/					360 180			
	Total Claims	Extra Clain	no Eo	e (\$)	Fee Paid (\$) Multiple Dependent Cla						
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	If the specification and		and 100 shas	ite of naner	(evoluding elect	tronically file	ed seguence :	or computer listings			
	under 37 CFR 1.52(e)										
	thereof. See 35 U.S.C		and 37 CFR 1	.16(s).							
	Total Sheets	Extra Sheets	s <u>Numb</u>	er of each	additional 50 c	or fraction (thereof Fe	e (\$) Fee Paid (\$)			
	-100 =		50 =	(round u	ι ρ to a whole nι	ımber)	х				
•	4. OTHER FEE(S)							Fees Paid (\$)			
	Non-English Specifica	tion, \$130 fee	(no small enti	ty discount)							
	Other (e.g., late filing s	surcharge):	Four Month E	xtension of	Time Fee			<u>1,590</u>			
	SUBMITTED BY	^									
	Signature	mile ()	brake		gistration No. orney/Agent)	50,461	Telephone	206-622-4900			
Ì	Name (Print/Type) Julie A. Urvater, Ph.D., Patent Agent Date August 18, 2006										
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